## CITY OF FLORENCE, KENTUCKY 8100 EWING BLVD. FLORENCE, KY 41042 859-647-5413

## PAYROLL TAX REFUND / EXCLUSION FORM YEAR ENDING 2022

Name:		SSN	SSN Telephone		
Address	S	Tele			
1.		TOTAL WAGES, TIPS, OTHER COMPENSATIO	N		
	A.	Total Gross Wages per W-2, (Attach W-2)	\$		
	В.	Florence Payroll Tax Withheld per W-2	\$		
2.		TAXES WITHHELD OVER THE MAXIMUM			
	A.	Maximum Payroll Tax Liability 2022	\$2,940.00		
	В.	Taxes withheld over the Maximum (Line 1B less Line 2A - If \$0 or less, enter \$0)	\$		
3.		EXCLUSION FORMULA			
	A.	Total Days Worked in 2022 (Including Florence)			
	B.	Total Days Actually Worked Outside Florence in 2022	*		
	C.	Line 3B Divided by Line 3A		. %	
	D.	Multiply Line 1A by Line 3C	\$		
	E.	Taxable Income (Line 1A Less Line 3D)	\$		
	F.	Tax Liablity (Line 3E x 2%)	\$		
4.		TAX LIABILITY CALCULATION			
	A.	Tax Liability/Refund (Line 3F Less Line 2B)	\$		

If Line 4A is Greater than the Sum of Line 1B, go to Line 4B. If Line 4A is Less than the Sum of Line 1B, go to Line 4C.

	В.	Amount of Tax Due to the City of F (Line 4A Less the Sum of Line 1B)		\$
			Penalty 12 %	\$
			Interest 1% pe	r Month \$
		TOTAL DUE TO TH	ORENCE \$	
	C.	Amount of Refund Due Taxpayer		
		(Sum of Line 1B Less Line 4A)		<u>\$</u>
		REFUND DU	E TO THE TAX	X PAYER \$
		w data for the aboved noted employed Florence and in other locations shou		22. Total work time
	Name of County/City/State		Percent of Tin	ne (spent working in the community)
				% % %
		Total	_ =	% %
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements and to the best of my knowledge and belief, it is true and complete.			in	nder penalties of perjury, I declare that the formation given under Section 3 above is ctual.
Signature of Employee			- Si	ignature of Employer/Title
			E	mployer's Phone Number
Date			$\overline{D}$	ate